

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|-----------|--------------|------------------|
| FEE DETERMINATION | <i>MD</i> | 75331 | |
| O.I.P.E. CLASSIFIER | | | <i>5 9-21-97</i> |
| FORMALITY REVIEW | | <i>61001</i> | <i>9-28 1998</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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